

CEDAR CREST HEALTH CENTER
1702 SOUTH RIVER ROAD

JANESVILLE 53546 Phone: (608) 756-0344

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 95

Total Licensed Bed Capacity (12/31/03): 95

Number of Residents on 12/31/03: 92

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Nonprofit Church

Skilled

Yes

Yes

Yes

91

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		9.8
Supp. Home Care-Personal Care	No					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.3	More Than 4 Years		22.8
Day Services	No	Mental Illness (Org./Psy)	34.8	65 - 74	6.5			----
Respite Care	No	Mental Illness (Other)	1.1	75 - 84	18.5			82.6
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	54.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.1	95 & Over	16.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.1		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	21.7	65 & Over	95.7	-----		
Transportation	No	Cerebrovascular	13.0		-----	RNs		13.6
Referral Service	No	Diabetes	8.7	Gender	%	LPNs		9.3
Other Services	No	Respiratory	5.4		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	13.0	Male	13.0	Aides, & Orderlies		
Mentally Ill	No		----	Female	87.0			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	6	100.0	327	43	100.0	123	0	0.0	0	42	97.7	181	0	0.0	0	0	0.0	91	98.9
Intermediate	---	---	---	0	0.0	0	0	0.0	0	1	2.3	181	0	0.0	0	0	0.0	1	1.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	6	100.0		43	100.0		0	0.0		43	100.0		0	0.0		0	0.0	92	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	4.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	2.3	Bathing	0.0	64.1	35.9	92
Other Nursing Homes	5.7	Dressing	4.3	75.0	20.7	92
Acute Care Hospitals	81.6	Transferring	10.9	70.7	18.5	92
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	10.9	63.0	26.1	92
Rehabilitation Hospitals	0.0	Eating	37.0	54.3	8.7	92
Other Locations	5.7	*****				
Total Number of Admissions	87	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	7.6	Receiving Respiratory Care	4.3	
Private Home/No Home Health	14.8	Occ/Freq. Incontinent of Bladder	54.3	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	29.5	Occ/Freq. Incontinent of Bowel	40.2	Receiving Suctioning	0.0	
Other Nursing Homes	3.4			Receiving Ostomy Care	0.0	
Acute Care Hospitals	6.8	Mobility		Receiving Tube Feeding	2.2	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	6.5	Receiving Mechanically Altered Diets	33.7	
Rehabilitation Hospitals	0.0					
Other Locations	5.7	Skin Care		Other Resident Characteristics		
Deaths	39.8	With Pressure Sores	3.3	Have Advance Directives	92.4	
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	88			Receiving Psychoactive Drugs	58.7	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.8	92.0	1.04	87.1	1.10	88.1	1.09	87.4	1.10
Current Residents from In-County	97.8	85.9	1.14	81.0	1.21	82.1	1.19	76.7	1.27
Admissions from In-County, Still Residing	28.7	22.1	1.30	19.8	1.45	20.1	1.43	19.6	1.46
Admissions/Average Daily Census	95.6	138.9	0.69	158.0	0.61	155.7	0.61	141.3	0.68
Discharges/Average Daily Census	96.7	139.5	0.69	157.4	0.61	155.1	0.62	142.5	0.68
Discharges To Private Residence/Average Daily Census	42.9	64.3	0.67	74.2	0.58	68.7	0.62	61.6	0.70
Residents Receiving Skilled Care	98.9	96.1	1.03	94.6	1.05	94.0	1.05	88.1	1.12
Residents Aged 65 and Older	95.7	96.4	0.99	94.7	1.01	92.0	1.04	87.8	1.09
Title 19 (Medicaid) Funded Residents	46.7	55.4	0.84	57.2	0.82	61.7	0.76	65.9	0.71
Private Pay Funded Residents	46.7	32.6	1.43	28.5	1.64	23.7	1.97	21.0	2.23
Developmentally Disabled Residents	0.0	0.6	0.00	1.3	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	35.9	36.2	0.99	33.8	1.06	35.8	1.00	33.6	1.07
General Medical Service Residents	13.0	24.3	0.54	21.6	0.61	23.1	0.56	20.6	0.63
Impaired ADL (Mean)	55.0	50.5	1.09	48.5	1.13	49.5	1.11	49.4	1.11
Psychological Problems	58.7	58.5	1.00	57.1	1.03	58.2	1.01	57.4	1.02
Nursing Care Required (Mean)	5.4	6.8	0.79	6.7	0.81	6.9	0.79	7.3	0.74